



The Florida Senate

Local Funding Initiative Request - Fiscal Year 2018-2019

1. **Title of Project:** Brevard Advanced-Manufacturing Training Center

2. **Senate Sponsor:** Dorothy Hukill

3. **Date of Submission:** 12/12/2017

4. **Project/Program Description:**

In order to meet the labor needs of our expanding manufacturing industry, we want to build a training facility at our local adult education center to train local workers in the fields of advanced manufacturing and welding. There is a projected 20.8% growth in the area of industrial machinery mechanics in Florida through 2024. Many of the students will be from our adult education programs.

5. **State Agency Contacted?** No

a. If yes, which state agency?

b. If no, which is the most appropriate state agency to place an appropriation for the issue being requested?
Department of Education

6. **Amount of Non-recurring Requested for fiscal year 2018-19:**

| Amount Requested for Operations | Amount Requested for Fixed Capital Outlay | Total Amount of Requested State Funds |
|---------------------------------|---|---------------------------------------|
| 100,000 | 1,400,000 | 1,500,000 |

7. **Type, amount and percent of matching funds available for this project for fiscal year 2018-19:**

| Type | Amount | Percent |
|--|--------|---------|
| Federal | 0 | 0.0% |
| State (excluding the amount of this request) | 0 | 0.0% |
| Local | 0 | 0.0% |
| Other | 0 | 0.0% |
| TOTAL | 0 | 0.0 % |

8. **Total Project Cost for fiscal year 2018-19 (including the Total Amount of Requested State Funds):** 1,500,000

9. **Previous Year Funding Details:**

a. Has funding been provided in a previous state budget for this activity? No

b. In the previous 5 fiscal years, how many years was funding provided? (Optional)

c. What is the most recent fiscal year the project was funded?



The Florida Senate

Local Funding Initiative Request - Fiscal Year 2018-2019

d. Were the funds provided in the most recent fiscal year subsequently vetoed?

e. Complete the following Worksheet.

| | | | |
|-------------------------------|---|--|---|
| FY: | Input Prior FY Appropriation for this project for FY 2017-18 (If appropriated in FY 2017-18 enter the appropriated amount, even if vetoed.) | | |
| Column: | A | B | C |
| Funds Description: | Prior Year Recurring Funds * | Prior Year Nonrecurring Funds * | Total Funds Appropriated (Column A + Column B) |
| Input Amounts: | | | |

10. Is future-year funding likely to be requested?

No

11. Program Performance:

a. What is the specific purpose or goal that will be achieved by the funds requested?

Prevent high school dropouts while delivering in-demand machinists, welders and certified production technicians to Space Coast manufacturers and aerospace/aviation companies.

b. What are the activities and services that will be provided to meet the intended purpose of these funds?

Train adult-education students (mainly night school students and others at high risk of dropping out) in highly marketable job skills. Students will learn shop safety and manufacturing skills in both a classroom and laboratory/shop setting with current machinery.

c. How will the funds be expended?

| Spending Category | Description | Amount |
|---|--|---------|
| Administrative Costs | | |
| <input checked="" type="checkbox"/> Executive Director/Project Head Salary and Benefits | Our current administration will oversee the program. | 0 |
| <input type="checkbox"/> Other Salary and Benefits | | |
| <input checked="" type="checkbox"/> Expense/Equipment/Travel/Supplies/Other | For machining and million equipment | 450,000 |
| <input checked="" type="checkbox"/> Consultants/Contracted Services/Study | Architect/design for building | 100,000 |



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Local Funding Initiative Request - Fiscal Year 2018-2019

| | | |
|---|--------------------------------|-----------|
| Operational Costs | | |
| <input type="checkbox"/> Salary and Benefits | | |
| <input type="checkbox"/> Expense/Equipment/Travel/Supplies/Other | | |
| <input type="checkbox"/> Consultants/Contracted Services/Study | | |
| Fixed Capital Construction/Major Renovation | | |
| <input checked="" type="checkbox"/> Construction/Renovation/Land/Planning Engineering | Construction, site development | 950,000 |
| TOTAL | | 1,500,000 |

d. What are the direct services to be provided to citizens by the appropriations project?

More job opportunities for students, mostly from low-income families; better economic growth for business owners and taxpayers.

e. Who is the target population served by this project? How many individuals are expected to be served?

High school students, jobless people, at-risk youth, state-college students. Target population is greater than 800. To start, we plan to enroll and train 200 per year.

f. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?

Rate of graduates hired in target industries monitored by our Economic Development Commission.

g. What are the suggested penalties that the contracting agency may consider in addition to its standard penalties for failing to meet deliverables or performance measures provided for in the contract?

Money to be returned to Dept. of Education.

12. The owner(s) of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owner(s) of the facility and the entity.

Recipient Brevard Public Schools would build this facility on its existing district-owned campus in Cocoa, Florida, a former middle school.

13. Requestor Contact Information:

- Name:** Jeff Arnott
- Organization:** Brevard Public Schools Department of Adult and Community Education
- Email:** arnott.jeffery@brevardschools.org
- Phone Number:** (321)633-3662

14. Recipient Contact Information:



The Florida Senate

Local Funding Initiative Request - Fiscal Year 2018-2019

a. Organization: Brevard Public schools

b. County: Brevard

c. Organization Type:

- ☐ For Profit
- ☐ Non Profit 501(c) (3)
- ☐ Non Profit 501(c) (4)
- ☐ Local Entity
- ☐ University or College
- ☒ Other (Please specify) School District

d. Contact Name: Matt Reed

e. E-mail Address: Reed.Matthew@brevardschools.org

f. Phone Number: (321)591-6943

15. If there is a registered lobbyist, fill out the lobbyist information below.

a. Name: Scott Ross

b. Firm: Capital Cities Consulting

c. Email: sross@capcitiesconsult.com

d. Phone Number: (850)980-9121